

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011
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1.0	PHA Information PHA Name: Woodridge Housing Authority PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): 10/2010 PHA Code: NY064												
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 40 Number of HCV units: 0												
3.0	Submission Type 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input checked="" type="checkbox"/> 5-Year Plan Only												
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)												
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program <table border="1"> <tr> <th>PH</th> <th>HCV</th> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> </table>	PH	HCV						
PH	HCV												
	PHA 1:												
	PHA 2:												
	PHA 3:												
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.												
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.												
5.2	Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. PHA Goal: Improve the quality of assisted housing Objective: Improve public housing management (PHAS score) 69 Progress: Woodridge Housing Authority was not required to have a PHAS score this year. WHA is currently in contract negotiations with a management firm that will also seek redevelopment opportunities. Objective: Increase customer satisfaction: Continue monthly meetings with residents to receive input and build better relationships and communication. Progress: Increased from quarterly to monthly meetings with residents to receive input and build better relationships and communication. Objective: Renovate or modernize public housing units: Continued to improve and update bathroom plumbing, including installing tub surrounds; replacing appliances and kitchen counters; energy efficient thermostats and improved insulation Progress: Installed appliances, replaced roof on building 5 at Mountaindale Road, and replaced living room windows at Maple Avenue site. PHA Goal: Provide an improved living environment Objective: Implement public housing security improvements: Add additional security cameras as funds become available. Progress: Continued maintenance of security cameras and lighting for safety PHA Goal: Promote self-sufficiency and asset development of assisted households Objective: Increase the number and percentage of employed persons in assisted living to help raise the rent Progress: Number of employed persons has increased, raising tenant paid share of rent Objective: Provide or attract supportive services to improve assistance recipients' employability: Develop partner with Workforce Development to provide referrals for families seeking to become self-sufficient. Enroll in Literacy Volunteers. Provide student tutoring. Progress: Works with Workforce Development and Literacy Volunteers. Provides volunteer student tutor in community room two times a week. PHA Goal: Ensure equal opportunity and affirmatively further fair housing Objective: Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability Progress: Continues to use affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex familial status, and disability												

6.0	<p>PHA Plan Update</p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:</p> <p>Financial Resources – See attachment ny064a01.</p> <p>Rent Determination – A household member must promptly report an increase of \$200 or more in monthly income when it occurs between Annual Rent Recertifications. No cash, only check or money order will be accepted for rent. Rent is still due on the first of the month. If the rent is not paid by the 15th of the month, on the 16th of the month, there will be a \$15 late fee, which will increase \$1 per day for each day it is late. The late fee will not exceed \$30 monthly. The bounced check fee is \$35. Monthly washing machine fee is \$15.</p> <p>Community Service and Self-Sufficiency – Revisions include coordinating with Literacy Volunteers and providing space for an onsite tutoring program. There is still continued coordinated efforts between the PHA and TANF including client referrals, information sharing regarding mutual clients for rent determination; Workforce Development Program. Community service requirements are listed in the A and O policy. When a resident gets off welfare and gets a job, the resident gets an income disallowance for two years.</p> <p>Fiscal Year Audit – The results of the most recent fiscal year audit was mailed separately as a hard copy.</p> <p>Civil Rights Certification – The Civil Rights Certification has been sent as a hard copy separately to the New York City HUD office.</p> <p>Asset Management – The PHA will be improving roofs, windows and refrigerators this year and long term will make improvements in heating system, plumbing improvements, energy efficient lighting, kitchen counters, kitchen cabinets and closets.</p> <p>Violence Against Women Act (VAWA)</p> <ol style="list-style-type: none"> (1) Lease addendum explained to each resident at move in and/or recertification detailing their rights and responsibilities under the Violence Against Women Act. (2) Copy of above mentioned Lease addendum attached. <p>(b) The 5-year and Annual Plan and Supporting Documents may be obtained at the Main administrative office of the PHA. The Resident Advisory board is also provided with a copy of its 5-Year PHA Plan</p>
7.0	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i></p> <p>Conversion of Public Housing –</p> <p>Conifer Management LLC began third party fee management beginning 10/01/09. Conifer oversees day to day operations and maintenance of the site. Conifer is researching redevelopment strategies.</p>
8.0	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p> <p>CFP FFY 2009 (See attachment ny064b01; CFP FFY 2010 (see attachment ny064c01) Capital Fund Recovery Grant (See attachment ny064d01)</p>
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p> <p>See attachment ny064e01. Annual Statement/Performance and Evaluation Report for CFP2009 (See Attachment ny064f01)</p>
8.3	<p>Capital Fund Financing Program (CFFP).</p> <p><input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p>
9.0	<p>Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p> <p>See attachment ny064g01.</p>
9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p> <p>See attachment ny064h01.</p> <p>A strategy for addressing to shortage of affordable housing for all eligible populations include:</p> <ol style="list-style-type: none"> (1) Maximize the number of affordable units available to the PHA within its current resources by continuing to employ effective maintenance and management policies to minimize the number of public housing units off-line. <p>A strategy to target available assistance to families at or below 50% of AMI include:</p> <ol style="list-style-type: none"> (2) Employ admissions preferences aimed at families who are working. <p>These two strategies are selected due to funding constraints, staffing constraints, limited availability of sites for assisted housing, extent to which particular housing needs are met by other organizations in the community and results of consultation with residents and the Resident Advisory Board.</p>

10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>We continue to provide integrated low income housing for the local community, with notification of program and job availability for all tenants. Please refer to section 5.2 of this PHA plan for progress on goals and objectives.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>The significant amendment and substantial deviation/modification for the Woodridge Housing Authority includes the following items:</p> <ol style="list-style-type: none"> 1. Change of at least 20% more or less in operating subsidy. 2. Major shift in tenant policy regarding rent collections, vigorous pursuit of late fees, enforcement of lease terms and conditions.

11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. See Attachment ny064i01.</p> <p>(g) Challenged Elements – There are no challenged elements.</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) ny064b,c,d</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only) ny064e01</p>
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This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

Instructions form HUD-50075

Applicability. This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

5.1 Mission. A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.

5.2 Goals and Objectives. Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.

6.0 PHA Plan Update. In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:

- (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
- (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

PHA Plan Elements. (24 CFR 903.7)

1. **Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures.** Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.

2. **Financial Resources.** A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.

3. **Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.

4. **Operation and Management.** A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.

5. **Grievance Procedures.** A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.

6. **Designated Housing for Elderly and Disabled Families.** With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: 1) development name and number; 2) designation type; 3) application status; 4) date the designation was approved, submitted, or planned for submission, and; 5) the number of units affected.

7. **Community Service and Self-Sufficiency.** A description of: (1) Any programs relating to services and amenities provided or offered to assisted families; (2) Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; (3) How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. (**Note: applies to only public housing**).

8. **Safety and Crime Prevention.** For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.

9. **Pets.** A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
10. **Civil Rights Certification.** A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
11. **Fiscal Year Audit.** The results of the most recent fiscal year audit for the PHA.
12. **Asset Management.** A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
13. **Violence Against Women Act (VAWA).** A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers

- (a) **Hope VI or Mixed Finance Modernization or Development.** 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm>
- (b) **Demolition and/or Disposition.** With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm
Note: This statement must be submitted to the extent that approved and/or pending demolition and/or disposition has changed.
- (c) **Conversion of Public Housing.** With respect to public housing owned by a PHA: 1) A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or

that the public housing agency plans to voluntarily convert; 2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/centers/sac/conversion.cfm>

- (d) **Homeownership.** A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) **Project-based Vouchers.** If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.

8.0 Capital Improvements. This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.

8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report. PHAs must complete the *Capital Fund Program Annual Statement/Performance and Evaluation Report* (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:

- (a) To submit the initial budget for a new grant or CFFP;
- (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
- (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (form HUD-50075.1), at the following times:

1. At the end of the program year; until the program is completed or all funds are expended;
2. When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
3. Upon completion or termination of the activities funded in a specific capital fund program year.

8.2 Capital Fund Program Five-Year Action Plan

PHAs must submit the *Capital Fund Program Five-Year Action Plan* (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

8.3 Capital Fund Financing Program (CFFP). Separate, written HUD approval is required if the PHA proposes to pledge any

portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:
<http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm>

9.0 Housing Needs. Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

9.1 Strategy for Addressing Housing Needs. Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

10.0 Additional Information. Describe the following, as well as any additional information requested by HUD:

- (a) **Progress in Meeting Mission and Goals.** PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**
- (b) **Significant Amendment and Substantial Deviation/Modification.** PHA must provide the definition of "significant amendment" and "substantial deviation/modification". **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)**

- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. **(Note: Standard and Troubled PHAs complete annually).**

11.0 Required Submission for HUD Field Office Review. In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*
- (b) Form HUD-50070, *Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)*
- (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)*
- (d) Form SF-LLL, *Disclosure of Lobbying Activities (PHAs receiving CFP grants only)*
- (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)*
- (f) Resident Advisory Board (RAB) comments.
- (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
- (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.1.
- (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.2.

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2009 grants)		
a) Public Housing Operating Fund	\$186,013	
b) Public Housing Capital Fund	\$ 64,105	
c) Capital Fund Recovery Grants (CFRG)	\$ 81,855	Roof, windows, refrigerators
2. Prior Year Federal Grants (unobligated funds only) (list below)		
2008 CFP (as of 7/31/09)	\$ 2465.12	Public Housing Capital improvements
3. Public Housing Dwelling Rental Income	\$137,135	
4. Other income (list below)		
Interest	\$ 242	
Other Income	\$ 1,455	
Excess Utilities	\$ 0	
Total resources	\$472,270.12	

Attachment ny064a01

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary

PHA Name: Bedford Housing Authority
Grant Type and Number: NY 360004501 09
Capital Fund Program Grant No.: NY 360004501 09
Replacement Housing Factor Grant No.:
Date of CFPP:

FFY of Grant: 2009
FFY of Grant Approval: 2009

Type of Grant

☒ Original Annual Statement
☐ Reserve for Disasters/Emergencies

☐ Revised Annual Statement (revision no.:)
☐ Final Performance and Evaluation Report

☐ Performance and Evaluation Report for Period Ending:

Line	Summary by Development Account	Original	Total Estimated Cost	Revised ¹	Obligated	Total Actual Cost ¹	Expended
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) ³	577,588.88					
3	1408 Management Improvements						
4	1410 Administration (may not exceed 10% of line 21)	103,416.12					
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition						
9	1450 Site Improvement						
10	1460 Dwelling Structures						
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment						
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities ⁴						

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

NY 064501

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary		FFY of Grant: 2009	
PHA Name: Woodbridge Housing Authority	Grant Type and Number: Capital Fund Program Grant No: 043606450109 Replacement Housing Factor Grant No:	FFY of Grant Approval: 2009	
Type of Grant: <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost¹
		Original	Revised²
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	104105	
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director <i>Jaay Pittman</i>		Signature of Public Housing Director	
Date 8/22/10			

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

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Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

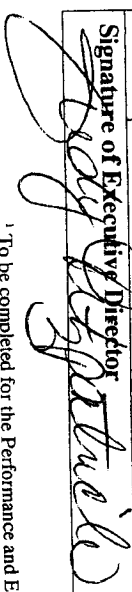

Part I: Summary		FFY of Grant: 2010 FFY of Grant Approval: 2010	
PHA Name: Woodridge Housing Authority		Grant Type and Number Capital Fund Program Grant No: NY3600450110 Replacement Housing Factor Grant No: Date of CFP:	
<input type="checkbox"/> Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input type="checkbox"/> Final Performance and Evaluation Report	
Reserve for Disasters/Emergencies		Total Estimated Cost	
Summary by Development Account		Revised?	
Line		Original	Obligated
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) ³	35872	48977
3	1408 Management Improvements	13105	0
4	1410 Administration (may not exceed 10% of line 21)	6552	6552
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs		
8	1440 Site Acquisition		
9	1450 Site Improvement		
10	1460 Dwelling Structures		
11	1465.1 Dwelling Equipment—None expendable	10 000	10 000
12	1470 Non-dwelling Structures		
13	1475 Non-dwelling Equipment		
14	1485 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs		
17	1499 Development Activities ⁴		
Total Actual Cost ¹			
Expenditures			

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHP funds shall be included here.

NY 064c01

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary		FFY of Grant: 2010	
PHA Name: Woodbridge Housing Authority Grant Type and Number: Capital Fund Program Grant No: UY30606452110 Replacement Housing Factor Grant No: Date of CFP:		FFY of Grant Approval: 2010	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Revised Annual Statement (revision no: 1) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost¹
		Original	Revised²
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	105529	105529
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director 		Date 8/12/10	Signature of Public Housing Director 
			Date

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

Annual Statement/Performance and Evaluation Report
Capital Fund Program Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No 2577-0220
Expires 4/30/2011

Part I Summary
PHA Name:
Woodbridge Housing Authority

Grant Type and Number
Capital Fund Program Grant No: NY1606450109
Replacement Housing Factor Grant No:
Date of CFP:

FY of Grant: 2009
FY of Grant Approval: 2009

Type of Grant		Original Annual Statement		Revised Annual Statement (version not Final Performance and Evaluation Report)		Total Actual Cost	
Performance and Evaluation Report for Period Ending: 3/31/2009		Summary By Development Account		Original		Revised	
Line	Summary By Development Account	Original	Revised	Obligated	Expended		
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) ¹						
3	1406 Management Improvements						
4	1410 Administration (may not exceed 10% of line 21)	1,000.00	1,000.00	0	0		
5	1411 Audit						
6	1415 Capital Program						
7	1430 Fee and Charge	5,855.00	5,855.00	0	0		
8	1440 Site Acquisition						
9	1450 Site Improvement						
10	1460 Dwelling Structures	59,000.00	59,000.00	0	0		
11	1465 Dwelling Equipment - Nonoperable	16,000.00	16,000.00	0	0		
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment						
14	1485 Depreciation						
15	1492 Moving to Work (Nonrenewable)						
16	1495 Relocation Costs						
17	1499 Development Activities ²						

¹ To be completed for the Performance and Evaluation Report
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement
³ FHs with under 250 units in development may use 100% of CFP Grants for operations
⁴ RIF funds shall be included here

ny 064 d 01

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
ONIB No. 2577-0226
Expires 4/30/2011

Part I: Summary		FY of Grant: 2009	
PIA Name: Woodbridge	Grant Type and Number: Capital Fund Program Grant No. NY 6606450109	FY of Grant Approval: 2009	
Housing Authority	Replacement Housing Factor Grant No. Date of CFFP:		
Type of Grant: <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2009	<input type="checkbox"/> Reserve for Disaster/Disruptive <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report		
1. Description	Summary by Development Account	Total Estimated Cost	Total Actual Cost ¹
18a	1591 Rehabilitation or Debt Service paid by the PIA	Original	Revised ²
18b	9600 Rehabilitation or Debt Service paid Via System of Direct Payment	Original	Revised ²
19	1502 Contingency (only not exceed 5% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	81,855.00	81,855.00
21	Amount of line 20 Related to LIR Activities		
22	Amount of line 20 Related to Section 904 Activities		
23	Amount of line 20 Related to Security - Staff Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures	56,850.00	56,850.00
Signature of Executive Director <i>Kevin Burke</i>		Date 6/12/09	Signature of Public Housing Director

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PIA's with under 250 units in development may use 100% of CFFP Grants for operations.
⁴ RHT funds shall be included here.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
ONHS No. 2877-0226
Expires 4/30/2011

Public Housing Authority

Grant Type and Number
Capital Fund Program Grant No. 177-16S045-1000

History of the Church 2000

Development Number Name/PLA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide	Administration	1410		1,000.00	1,000.00	0	0	In progress
HA wide	Fees and Costs Architect/Engineer	1430		5,855.00	5,855.00	0	0	In progress
HA Wide	Replace refrigerators with energy efficient refrigerators	1465.1	40	16,000.00	16,000.00	0	0	
NY064-1-B	Replace Building 5 roof	1460	1	18,150.00	18,150.00	0	0	
NY064-1-A	Replace leaky windows	1460	32	12,450.00	12,450.00	0	0	
NY064-1-B	Replace leaky windows	1460	66	28,400.00	28,400.00	0	0	

2 To be completed for the Performance and Evaluation Report in a Revised Annual Statement

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2527-0226
Expires 4/30/2011

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U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
ONHB No. 2577-0226
EXHIBIT 4/30/2011

Federal IT of China 2009

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U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
ONR No. 2577-0226
Expires 4/30/2011

Federal RPY of Crane 2009

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Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/20011

Part I: Summary

PHA Name/Number		Locality (City/County & State)			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name NY064 Woodridge Housing Authority	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
B.	Physical Improvements Subtotal	Assessed Statement	\$52,000	\$54,531	\$51,563	\$40,000
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment		\$2,900			\$13,800
E.	Administration					
F.	Other					
G.	Operations		\$10,629	\$10,998	\$13,966	\$11,729
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total	\$65,529	65,529	65,529	65,529	65,529

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**U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011**

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Office of Public and Indian Housing
Expires 4/30/2011**

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Office of Public and Indian Housing
Expires 4/30/2001**

[illegible]

**U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011**

[illegible]

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

form HUD-50075.2 (4/2008)

**CERTIFICATION OF DOMESTIC
VIOLENCE, DATING VIOLENCE
OR STALKING**

**U.S. Department of Housing
and Urban Development
Office of Housing**

Attachment 1
OMB Approval No. 2502-0204

Public reporting burden for this collection of information is estimated to average 1 hour per response. This includes the time for collecting, reviewing, and reporting the data. Information provided is to be used by owners and management agents administering Section 8 project-based assistance under the United States Housing Act of 1937 (42 U.S.C. 1437) to request a tenant to certify that the individual is a victim of domestic violence, dating violence or stalking. The information is subject to the confidentiality requirements of the HUD Reform Legislation. This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number.

Purpose of Form: The Violence Against Women and Justice Department Reauthorization Act of 2005 protects qualified tenants and family members of tenants who are victims of domestic violence, dating violence or stalking (collectively "domestic violence") from being evicted or terminated from housing assistance based on acts of such violence against them.

Use of Form: If you have been a victim of domestic violence, you or a family member on your behalf, must complete and submit this certification form, or submit the information described below under "Alternate Documentation," which may be provided in lieu of the certification form, within 14 business days of receiving the written request for this certification form from the owner or management agent. The certification form or alternate documentation must be returned to the person and the address specified in the written request for the certification form. If the requested certification form or the information that may be provided in lieu of the certification form is not received by the 14th business day or any extension of the date provided by the owner or management agent, none of the protections afforded to victims of domestic violence under the Section 8 project-based assistance program will apply. Distribution or issuance of this form does not serve as a written request for certification.

Alternate Documentation: In lieu of this certification form (or in addition to it), the following documentation may be provided:

(1) A federal, state, tribal, territorial, or local police or court record; or

(2) Documentation signed by an employee, agent or volunteer of a victim service provider, an attorney or medical professional, from whom the victim has sought assistance in addressing the domestic violence, dating violence or stalking, or the effects of abuse, in which the professional attests under penalty of perjury (28 U.S.C. 1746) to the professional's belief that the incident(s) in question are bona fide incidents of abuse, and the victim has signed or attested to the documentation.

TO BE COMPLETED BY OR ON BEHALF OF THE VICTIM OF DOMESTIC VIOLENCE:

1. Date written request is received from owner or management agent: _____

2. Name of victim: _____

3. Your name (if different) _____

4. Name(s) of other family members listed on the lease: _____

5. Name of the abuser: _____

6. Relationship of the abuser to the victim: _____

7. Date of incident: _____

8. Time of incident: _____

9. Location of incident: _____

{Page two must be completed and attached to this form.}

ny 064 P 01

In your own words, describe the incident (Attach more sheets if needed. Initial each attachment.):

This is to certify, under penalty of perjury, that the information provided is true and correct, and that the individual named above in Item 2 is a victim of domestic violence, dating violence or stalking. The incident(s) in question is a bona fide incident(s) of such actual or threatened abuse. I acknowledge that submission of false information could jeopardize program eligibility and could be the basis for termination of Section 8 project-based assistance or eviction from assisted property.

Signature _____ Executed on (Date) _____

All information provided to an owner or management agent related to the incident(s) of domestic violence, dating violence or stalking, including the fact that an individual is a victim of domestic violence, dating violence or stalking shall be retained in confidence by the owner or management agent and shall neither be entered into any shared database nor provided to any related entity, except to the extent that such disclosure is:

- (1) Requested or consented to by the victim in writing;
- (2) Required for use in an eviction proceeding or termination of assistance; or
- (3) Otherwise required by applicable law

LEASE ADDENDUM

VIOLENCE AGAINST WOMEN AND JUSTICE DEPARTMENT REAUTHORIZATION ACT OF 2005

TENANT	LANDLORD Woodridge Housing Authority	UNIT NO. & ADDRESS
--------	--------------------------------------------	--------------------

This lease addendum adds the following paragraphs to the Lease between the above referenced Tenant and Landlord.

Purpose of the Addendum

The lease for the above referenced unit is being amended to include the provisions of the Violence Against Women and Justice Department Reauthorization Act of 2005 (VAWA).

Conflicts with Other Provisions of the Lease

In case of any conflict between the provisions of this Addendum and other sections of the Lease, the provisions of this Addendum shall prevail.

Term of the Lease Addendum

The effective date of this Lease Addendum is _____. This Lease Addendum shall continue to be in effect until the Lease is terminated.

VAWA Protections

1. The Landlord may not consider incidents of domestic violence, dating violence or stalking as serious or repeated violations of the lease or other "good cause" for termination of assistance, tenancy or occupancy rights of the victim of abuse.
2. The Landlord may not consider criminal activity directly relating to abuse, engaged in by a member of a tenant's household or any guest or other person under the tenant's control, cause for termination of assistance, tenancy, or occupancy rights if the tenant or an immediate member of the tenant's family is the victim or threatened victim of that abuse.
3. The Landlord may request in writing that the victim, or a family member on the victim's behalf, certify that the individual is a victim of abuse and that the Certification of Domestic Violence, Dating Violence or Stalking, Form HUD-91066, or other documentation as noted on the certification form, be completed and submitted within 14 business days, or an agreed upon extension date, to receive protection under the VAWA. Failure to provide the certification or other supporting documentation within the specified timeframe may result in eviction.

Tenant

Date

Landlord

Date

A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income <= 30% of AMI	1,914	4	5	5	2	3	1
Income >30% but <=50% of AMI	1,714	3	4	5	2	3	1
Income >50% but <80% of AMI	1,927	3	4	5	2	3	1
Elderly	1,756	4	3	2	4	4	1
Families with Disabilities	2,178	3	5	2	5	4	1
White	6,265	3	3	3	2	3	1
Black	1,078	3	3	3	2	3	1
Hispanic	1,153	3	3	3	2	3	1
Native American	44	3	3	3	2	3	1
Asian	87	3	3	3	2	3	1
Pacific Islander	0	0	0	0	0	0	0

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- ☒ U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset 2000 census

Attachment ny064g01

Housing Needs of Families on the Waiting List			
Public Housing			
	# of families	% of total families	Annual Turnover
Waiting list total	42		5
Extremely low income <=30% AMI	22	52	
Very low income (>30% but <=50% AMI)	20	48	
Low income (>50% but <80% AMI)	0	0	
Families with children	22	52	
Elderly families	16	38	
Families with Disabilities	4	9	
White	29	69	
Black	7	17	
Hispanic	10	24	
Native American/ Alaska Native	0	0	
Asian	0	0	
Pacific Islander	0	0	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	20	48	
2 BR	16	38	
3 BR	4	9	
4 BR	2	5	
5 BR	0	0	
5+ BR	0	0	
Waiting list is not closed.			

Attachment ny064h01

RESIDENT ADVISORY BOARD COMMENTS
Janice Caballero, RESIDENT
June 23, 2010

She reviewed the Five Year Plan.

She agreed with it and had no suggestions for change other than two suggestions for capital improvement ideas.

1. Get stronger lighting in dining room.
2. Provide a bus shelter for resident children.

Analysis of recommendations and decisions made on recommendations by
Woodridge Housing Authority Board of Directors
July 20, 2010

1. The recommendation for stronger lighting in the dining room will be analyzed as part of a physical needs assessment that will be done in the near future. Then a recommendation for further action will be considered.
2. The recommendation for a bus shelter will be considered in future capital plans.

Both of these recommendations were considered, but the Board of Directors determined that no changes to the PHA Plan were necessary.

Attachment ny064i01

PHA Plan Elements for Woodridge Housing Authority

1. **Eligibility, Selection and Admissions Policies, including Wait List Procedures** – This is all included in the Public Housing Admissions and Continued Occupancy Policy (A&O) which includes the Tenant Selection and Assignment Plan (TSAP).
When families near the top of the waiting list and we receive notification of intent to vacate, we call in the next person on the waiting list and we begin the verification process. Nonincome screening factors to establish eligibility for admission to public housing is criminal or drug-related activity, rental history and housekeeping. The PHA requests criminal records from local law enforcement agencies for screening purposes. The PHA plan uses a community-wide list to organize its public housing waiting list. Interested persons apply for admission to public housing at the PHA main administrative office by calling or coming in person. Since the PHA has only one development, it will not operate a site-based waiting list. Applicants are given one vacant unit choice before they are removed from the waiting list for all waiting list types. The PHA plan targets at least 40% of all new admissions to public housing to families at or below 30% of median area income. Transfers take precedence over new admissions in emergencies, when there is over-housing, under-housing, medical justification and to permit modernization work.

Preferences for admission include:

- a. Residents who live and/or work in Woodridge or Mountindale
- b. Involuntary Displacement due to natural disaster or fire
- c. Working families and those unable to work because of age or disability
- d. Households with strong employment history but are temporarily unemployed
- e. Veterans

Residents can obtain information about the rules of occupancy of public housing in the PHA-resident lease and in the PHA's Admissions and Continued Occupancy Policy.

- The Housing Authority is exempt from implementing a Deconcentration Policy because we have one project with less than 100 units.
2. **Financial Resources** – This includes FY 2009 Capital Fund Program and the FY 2009 Capital Fund Recovery Grants (CFRG). It also includes the most recent board-approved operating budget for the public housing program.
3. **Rent Determination** – The Public Housing rent determination policies, including the methodology for setting public housing flat rents and the schedule of flat rents offered, are included in the public housing A & O Policy.
The following discretionary minimum rent hardship exemption policies are listed below:
The Woodridge Housing Authority has set the minimum rent at \$50. If the family requests a hardship exemption, however, the Woodridge Housing Authority will suspend the minimum rent beginning the month following the family's request until the Housing Authority can determine whether the hardship exists and whether the hardship is of a temporary or long-term nature.
 - A. A hardship exists in the following circumstances:
 1. When the family has lost eligibility for or is waiting an eligibility determination for a Federal, State, or local assistance Program, including a family that includes a member who is a non-citizen lawfully admitted for permanent residence under the Immigration and Nationality Act who would be entitled to public benefits but for title IV of the Personal Responsibility and Work Opportunity Act of 1996.
 2. When the family would be evicted because it is unable to pay the minimum rent;
 3. When the income of the family has decreased because of changed circumstances, including loss of employment;
 4. When a death has occurred in the family.
 - B. No hardship. If the Housing Authority determines there is no qualifying hardship, the minimum rent will be reinstated, including requiring back payment of minimum rent for the time of suspension.
 - C. Temporary hardship. If the Housing Authority reasonably determines that there is a qualifying hardship but that it is of a temporary nature, the minimum rent will not be imposed for a period of 90 days from the beginning of the suspension of the minimum rent. At the end of the 90 day period, the minimum rent will be imposed retroactively to the time of suspension. During the suspension period the Housing Authority will not evict the family for nonpayment of the rent owed for the suspension period.
 - D. Long-term hardship. If the Housing Authority determines there is a long-term hardship, the family will be exempt from the Minimum rent requirement until the hardship no longer exists.
 - E. Appeals. The family may use the grievance procedure to appeal the Housing Authority's determination regarding the Hardship. No escrow deposit will be required in order to access the grievance procedure.

The PHA does not plan to charge rents at a fixed amount or percentage less than 30% of adjusted income.
The PHA does not have ceiling rents.
Rent re-determinations:
Between income reexaminations, tenants must report changes in income or family composition to the PHA which result in a rent adjustment for the following reasons:

 1. A household member has an increase of \$200 or more in monthly income when it occurs between Annual Rent Recertifications;
 2. Anytime family has a new source of income;
 3. Anytime family has a change in family composition.

Flat Rents: The HA has set flat rents at current Tax Credit levels as determined by HUD annually.
No cash: Only check or money order will be accepted for rent.
Rent is still due the first of the month. If the rent is not paid by the 15th of the month, on the 16th of the month, there will be a \$15 late fee, which will increase \$1 per day for each day it is late. The late fee will not exceed \$30 monthly.
Monthly washing machine fee is \$15.

- 4. **Operation and Management** – The PHA has Public Housing management and maintenance policy documents, including the Admissions and Continued Occupancy Policy, the Maintenance Policy in ACOP, a Personnel Policy, a Travel Policy and a Procurement Policy in ACOP and a policy for the prevention or eradication of pest infestation (including cockroach infestation). Conifer Management began third party management of day to day operations in October 2009.
The Woodridge Housing Authority consists of 40 family units of Public Housing with an expected turnover of 5 units annually.

5.Grievance Procedures – Written Public Housing grievance procedures and informal hearing and review procedures in addition to federal requirements found at CFR Part 966, Subpart B, for residents of public housing are available at the PHA main administrative office in the Admissions and Occupancy Policy.

6.Designated Housing for Elderly and Disabled Families – The PHA does not have any projects that have been designated, nor will we apply for the designation for occupancy by elderly and disabled families.

7.Community Service and Self-sufficiency –

1. There are coordination efforts between the PHA and TANF agency which include client referrals, information sharing regarding mutual clients for rent determination. There is coordination with Workforce Development, Literacy Volunteers, and tutoring programs.
2. The PHA has tutoring programs for students.
3. The PHA has the community service requirements listed in the A & O policy. When a resident gets off welfare and gets a job, the resident gets an income disallowance for two years.

8.Safety and Crime Prevention-

1. The need for measures to ensure the safety of public housing residents include residents fearful for their safety and/or the safety of their children ; and observed lower-level crime, vandalism and/or graffiti.
2. The security cameras at the Mountindale Road site help to deter crime. The PHA has cooperation with the school and DARE Program for drug awareness and prevention for students. There are monthly meetings with residents to receive input and build better relationships and communication.
3. Coordination between the PHA and the Woodridge Police Department to carry out crime prevention measures and activities including regular patrol of the development by the Woodridge Police Department. The Woodridge Police Department provides crime data to housing authority staff for analysis and action.

9.Pet Policy – The PHA's policies and requirements pertaining to the ownership of pets in public housing is incorporated in the A and O Policy.

10.Civil Rights Certification – Civil Rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

11.Fiscal Year Audit – The results of the most recent fiscal year audit are available at the main administrative office. These results were submitted to HUD.

12.Asset Management – The PHA will be replacing windows and appliances this year and long term will make improvements in heating system, plumbing improvements, energy efficient lighting, kitchen counters, kitchen cabinets and closets.

13.Violence Against Women Act (VAWA) –

1. All current residents receive a summary of the protections afforded them under the Violence Against Women Act at annual recertification. All residents sign a Lease Addendum regarding the Violence Against Women Act at annual recertification. All applicants are provided with the same information and must sign the Violence Against Women Lease Addendum as part of their move in process.

These PHA Plan Elements 2010 are on file in Main Administrative Office.

**PHA Certifications of Compliance with the PHA Plans and Related Regulations:
Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan**

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the ~~2015~~ 5-Year and/or ~~2014~~ Annual PHA Plan for the PHA fiscal year beginning 10/2010 hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

- out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
 16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
 17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
 18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
 19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
 20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
 21. The PHA provides assurance as part of this certification that:
 - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
 - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
 - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
 22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

Woodridge Housing Authority
PHA Name

N4064
PHA Number/HA Code

☒ 5-Year PHA Plan for Fiscal Years 2010 - 2014

☐ Annual PHA Plan for Fiscal Years 20__ - 20__

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
<u>Judy Fitzpatrick</u>	<u>Executive Director</u>
Signature	Date
<u>Judy Fitzpatrick</u>	<u>9/09/10</u>

Civil Rights Certification

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

Civil Rights Certification**Annual Certification and Board Resolution**

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

Woodridge Housing Authority 24064
PHA Name PHA Number/HA Code

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
Judy Fitzpatrick	Executive Director
Signature <i>Judy Fitzpatrick</i>	Date 9/09/10

**Certification for
a Drug-Free Workplace**

U.S. Department of Housing
and Urban Development

Applicant Name

Woodridge Housing Authority

Program/Activity Receiving Federal Grant Funding

NY 064

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

2. Sites for Work Performance. The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Site A - 41 Maple Ave. Woodridge NY 12789

Site B - 357 Mountaineer Road Woodridge NY 12789

Check here ☐ if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Judy Fitzpatrick

Title

Executive Director

Signature

X Judy Fitzpatrick

Date

9/09/10

form HUD-50070 (3/98)

ref. Handbooks 7417.1, 7475.13, 7485.1 & 3

**Certification of Payments
to Influence Federal Transactions**

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

Applicant Name

Woodridge Housing Authority

Program/Activity Receiving Federal Grant Funding

NY 064

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Judy Fitzpatrick

Title

Executive Director

Signature

Judy Fitzpatrick

Date (mm/dd/yyyy)

9/09/10

Previous edition is obsolete

form HUD 50071 (3/98)
ref. Handbooks 7417.1, 7475.13, 7485.1 & 7485.3

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

Approved by OMB

0348-0046

(See reverse for public burden disclosure.)

1. Type of Federal Action: <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input checked="" type="checkbox"/> A a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Woodridge Housing Authority PO BOX 372 357 Mountaindale Rd Woodridge NY 12789 Congressional District, if known: 4c 22nd	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: N/A Congressional District, if known:	
6. Federal Department/Agency: HUD	7. Federal Program Name/Description: 2009 Capital Funds Recovery Grant CFDA Number, if applicable:	
8. Federal Action Number, if known:	9. Award Amount, if known: \$ 81,855	
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI): N/A	b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI): N/A	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: <u>Judy Fitzpatrick</u> Print Name: <u>Judy Fitzpatrick</u> Title: <u>Executive Director</u> Telephone No.: <u>845-434-4451</u> Date: <u>9/09/10</u>	
Federal Use Only:	Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)	